

MEDICAL SUPPORT OF NOSTRUMS.*

By SAMUEL HOPKINS ADAMS.

MOST patent medicines take their rise from the medical profession. A physician devises some combination of drugs which he uses with effect, real or imagined, in his practice. Dr. Bunn's mixture acquires a considerable local fame. One day it occurs to the doctor that he can make a good thing of that mixture by selling it beyond the little circle of his immediate practice. So he goes to the United States Patent Office and obtains, not a patent, for that would necessitate his giving out the formula, but trade-mark registration. In the matter of mere trade-mark registration the Patent Office is not interested as to the component parts of the remedy. For all the Government cares, Dr. Bunn's medicine may be composed of nitroglycerine and assafetida, or, more innocently, of ashes and glue. What are you going to call it? is the only question the Patent Office asks. "Bunn's Bowel Balm" says the applicant. Over the records goes an industrious clerk to discover if any previous Bunn has ever entered a claim to a bowel balm, finds none, issues a certificate, and the job is done. Another regular has broken away from the profession into quackery, and another nostrum been launched at the vitals of the public. Such is, in essentials, the origin of Peruna, which is Dr. Hartman's variation of the old-time Beech's Neutralizing Mixture. To be sure, the variation is a wide one now, because when Dr. Hartman came to realize that the really essential thing in his proprietary was its exhilarant quality, he promptly discarded the rest of the drugs (leaving just enough so that he could say they were there), and pinned his faith to cologne spirits and water, with what brilliant results the newspaper advertisements testify most eloquently. Here, by the way, is another great advantage in simply copyrighting a proprietary—one can alter the formula *ad libitum*.

In other cases the physician himself gets no good of his invention. Two drug clerks several years ago heard one physician advise another to try a prescription of mixed acetanilid, caffeine, and bicarbonate of soda in cases of headache. It sounded profitable to the drug clerks. They got together a little capital, organized their business, and put out the mixture under the name of Antikamnia. Now, Antikamnia sounds quite ethical, because it's Greek. It is ethical only in that it contrives to keep its advertising in the medical journals. As a matter of fact, this proprietary began its career on a basis of deception, and it has been consistently and profitably lying ever since. No nostrum in the long list has ever more completely befooled the medical profession. Yet it is the medical profession that supports it, and has now so firmly established it that if ever the support is withdrawn the nostrum can, and undoubtedly will, flare forth in the public prints with all the backing it needs. Consult the newspaper medical-advertising columns and see if you cannot find there to-day several proprietaries which a few years ago were strictly "ethical," then send for their "literature," and you will encounter some interesting reading in the form of testimonials from physicians.

Medical testimonials are very easy to get in the so-called "ethical" field. But they don't seem very impressive when one comes to look into them. * * *

The geographical location of the physicians who lend their names to testimonials is interesting, perhaps even significant. Take Ozomulsion, for instance, which was formerly an "ethical" remedy. Here are some of the typical towns from which its medical support comes: Munice, Ind.; Nunda, N. Y.; Stanley, N. Y.; Marion, Ind.; Woodstock, Va.; Elgin, Ill.; Jackson, Tenn.; Albion, Mich.; Somerset, Ind.; Battle Creek, Mich.; East Syracuse, N. Y.; Kittery,

Maine; Elida, Ohio; Bridgeton, N. J.; Morgantown, N. C.; Paris, Texas; Flint, Mich., etc.

Curiously enough it is just this class of places that furnishes the familiar "God-bless-Peruna" letters which appear in the dailies. * * * What these men wrote regarding Ozomulsion is innocent enough in substance, but the harmful feature is that they are helping with their own names and professional influence a fraud. It is a fraud because it advertises unqualifiedly to cure consumption. I don't know whether either of these gentlemen is here to-night, but in their absence or silence I shall assume that neither would wish to support the statement that Ozomulsion cures consumption.

One physician I have met who does support it, though with difficulty. For purposes of identification I will call him Smith, which happens to be his name. He is the consulting physician of the Ozomulsion Company, in a purely ethical capacity, he assures me. It took me 15 minutes of direct and repeated questioning, very much in the nature of a cross-examination, to pin Dr. Smith down to a plain statement of belief that Ozomulsion would cure consumption, and even then he qualified his *credo* with the phrase "in many cases." This was after he had attempted to wiggle away from the point of the interview by saying that "in the early stages of the disease" Ozomulsion would be efficacious, and that it did not "claim to cure consumption." Confronted with the sweeping assertions of the newspaper advertising, he admitted that his ethical employment did not include any supervision of this vital branch, and that he had never even seen the advertisement under discussion. Inferior as is the status of the physicians who hire out to patent-medicine concerns, few of them, so far as my experience goes, will personally support the extravagant claims made by their employers. Even Dr. Hartman, who is a singularly frank and open person outside of his advertising, assured me that Peruna never *cured* any disease. His theory is that the alcohol in the mixture cheers up the patient (which is indubitably the fact), that the advertising claims inspire faith, and that the combination of faith and jag, "trust and bust," to put it broadly, does the business. This theory, I may add, is for private use only, and is not approved by Peruna's advertising manager.

Foreign testimony from men of standing is much easier to obtain than domestic. Why this should be so has puzzled me for some time, but I discovered the reason while investigating that remarkable fake germ-killer, Liquozone. The Liquozone Company announced that it had secured the services of Professor Pouchet of Paris as their scientific representative in France. My first impression was that Professor Pouchet was probably another home-made myth, like the famous German savant, Professor Pauli, whom Liquozone created and subsequently dissipated. Inquiry showed, however, that there really is a Prof. G. Pouchet of Paris, that he holds a responsible position under the government, and that, although not a scientist of the first rank, he stands well professionally. *Collier's* sent its Paris representative to interview Professor Pouchet.

"Have you lent your name to any patent medicine, Professor?" asked the interviewer.

"I? No; I do not do that sort of thing."

"Then the Liquozone Company is using your name without authority?"

"Ah, the Liquozone Company? That matter is in process."

"Then you are doing some work for them, and they are authorized to use your name in America?"

A translation, giving the spirit rather than the letter of the learned professor's next remark, is best couched in a familiar American idiom:

"America! I don't give a damn for America! Nobody knows me in America."

* Abstracted from the *Maryland Medical Journal*.

There, I fancy, we have the attitude of the average foreign specialist toward American patent medicines which pay liberally.

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Indignant disgust is the sentiment aroused in the medical breast by the patent-medicine advertising in the daily papers. Very right. But what about the patent medicines advertised in the medical press? Ah, but that is addressed to the profession alone, you say. Is that a sufficient excuse for extravagant claims, fraudulent exploitation, and direct misstatement of vital facts? I think I can point out all of these in nine-tenths of the reputable medical publications in America. Take the Liquozone advertising, for comparison. Its principal claim—that which makes it ludicrous in the eyes of every intelligent person—is that it destroys germs in the blood, that it is deadly to vegetable matter, harmless to animal, and so eradicates the cause of all germ diseases. Very well. I will now read to you extracts from three advertisements clipped from prominent medical journals:

Zymotidine—"Will prevent microbic proliferation in the blood-streams, and acts as an efficient eliminator of those germs and their toxins which are already present."

Acetozone (this is under a big display head of "Typhoid Fever")—"It is promptly destructive to germ life, yet is harmless to the human organism when taken internally."

Keimol—"A positive germicide and antiseptic. Is efficient when used either externally or internally."

Gentlemen, there are three internal germicides, so claimed, which seem to my untutored lay mind to be about parallel to Liquozone's demands on one's credulity as far as they go.

Nor is the consumption cure lacking in ethical advertising. "McArthur's Syrup of Hypophosphites" "has proved itself (I am quoting) time and time again to be positively beneficial in this condition in the hands of prominent observers, clinicians, and, what is more, average practicing physicians, hundreds of whom have written us their admiring encomiums in its behalf, and it is the enthusiastic conviction of many that its effect is truly specific."

In criticising this advertisement I would ask only if any one here believes that there is a true specific for tuberculosis. Again, we have a "sure cure for dropsy." "Hygeia Presents Her Latest Discovery," declares the advertisement, and fortifies it with a picture worthy of Swamp Root or Lydia Pinkham. If Anasarcin is in truth a sure cure for dropsy, then the medical profession is delinquent in that there are still uncured cases in every city and town. If not, what does the medical journal which prints this flamboyant half-page think of the profession, that it lends the support of its columns to such a claim?

So much for fraud and exaggeration. Now for dangerous deception. I wish I might have the aid of a stereopticon to show the Antikamnia advertisement which I hold here. Probably most of you are familiar with it, however. A gate is shown, cross-barred with the letters "A. K." above which a tabloid moon, similarly inscribed, illuminates with its effulgence the legend, "No Pain Beyond This Gate." Below is the inscription, "Pain Finds Relief in Antikamnia Tablets," followed by three lines of direct and comprehensive misstatement:

"Do not depress the heart."

"Do not produce habit."

"Are accurate, safe, sure."

Let us analyze these claims. In the first place, Antikamnia, which depends for its effect upon acetanilid, does depress the heart. Only thus can it produce any result. Second, it does, like all the acetanilid preparations, produce habit if long persisted in. Third, it is anything but accurate, it is never safe, and it is sure only in its heart-depressant tendency, and even then in varying degrees. So we

have five direct lies in three lines of print—a triumph of condemnation not excelled by any lay-journal advertising known to me.

Does this sort of exploitation fool the physician? Surely it must deceive many or the shrewd advertiser would not waste his money on it. Yet it plainly lies within the power of the profession to put an end to it. To be sure, the medical journal, like every other publication, depends upon its advertising for support, but the advertising depends upon circulation for results. Let medical opinion once make itself emphatically heard upon this point, and even those publications that are directly controlled by the advertising interests, such as the *New York Medical Journal*, for instance, which is published by an advertising agency, will perforce purge themselves of open fraud.

From suggestion to criticism is but a step, and for the moment I am going to assume the privilege of plain speech and point out what seems to me a vital weakness of the medical opposition to patent medicines. You have not, as a profession, an intelligent idea of the forces which you are fighting. Since entering upon this field of work I have received from physicians enough fundamental misinformation to keep me in jail for the rest of my natural life on libel charges had I accepted one-tenth of it. To mention a few typical cases: A New York practitioner whose name is a familiar one, probably, to all of you, assured a group of men at a club where I was present that Peruna was loaded with cocaine. I inquired the source of his information, and was told that recent analyses agreed on the fact. There is, of course, no cocaine in Peruna. A St. Louis doctor wrote me that the real Dr. Hartman of Peruna fame was dead, and that the "young man" who had taken his place is an impostor. The present Dr. Hartman isn't any younger than 76. He is the real, original Peruna article, and makes no pretence of being other than he is—a whole-souled, unashamed, honest-spoken old quack. Probably a dozen physicians have spoken to me about the cocaine in Coco-Cola. The cocaine in Coco-Cola is like the snakes in Ireland—there's none there. Two or three men particularly interested in tuberculosis have suggested that I attack Piso's Consumption Cure on the ground that it contains opium. It may be true that the Piso nostrum once contained opium; it doesn't any longer. Unless the old analyses are all false, the formula was changed many years ago.

Such cases as these show how dangerously swift the profession is to jump at conclusions. You are fighting a very keen and powerful enemy in the patent-medicine man, or rather you are just beginning to fight him, for you have let him take the aggressive thus far. There is little about your profession that he doesn't know. When he misrepresents you he does it shrewdly. There is little about his profession that you do know. When you misrepresent him you do it unintentionally and clumsily. Your effective weapon is the truth, and you haven't yet found it. Through reckless statements you are in danger of forfeiting that public confidence which should be your most potent ally. Find out where the foe is before you strike. Don't hit out with your eyes shut.

Here I may perhaps be pardoned if I say a word regarding the attitude of the magazines which have entered upon this fight. And I cannot begin better than by quoting the words of one of the ablest representatives of the patent-medicine business, Dr. Charles H. Stowell, general manager of the J. C. Ayer Company, which makes Ayer's Pectoral, Ayer's Sarsaparilla, and other nostrums:

"In every line of business but ours the proprietor urges upon the purchaser the closest examination and the most thorough investigation. 'All wool and a yard wide' is a business phrase which every honest merchant is only too glad to employ as his motto. The proprietary-medicine business is about the only business on the face of the earth where the people deliberately engage in a serious game of 'blind man's

bluff,' hoping thereby to catch something which shall prevent a possible break in the family circle.

"But, you say, 'How is it with the medical profession? They never tell anything!' Indeed they do tell, and every prescription proves it. Although the prescription may be written in Latin, or the technical name of the drugs may be given (and for the best of reasons), yet the person who has the prescription can most certainly ascertain the meaning of every term. Of course, we must grant that there are times when it is best for the physician to hide from the patient the nature of the remedy. But we must remember that the doctor deals with the most acute, the most critical, the most desperate of cases. The turn of the hand may mean success or failure. Life itself may depend upon what is done during the next 30 minutes, or even less time than that. This cannot be said of proprietary medicines. Hence the exception noted above only the better proves the rule. Let us give each and every ingredient in our medicines, with the precise amount of said ingredients in a given quantity of the finished product.

"If we use alcohol, let us say so. Honesty and frankness, with intrinsic merit, recently elected a man to the Presidency of these United States, and honesty and frankness will elect into popular and continued favor any genuine, worthy medicine. If all reputable houses would only engage in such an endeavor, we could wipe out forever a great lot of miserable, useless, and even dangerous compounds that are now causing, directly or indirectly, the annual loss of thousands and thousands of lives, to say nothing of the millions of dollars stolen from our honest, hard-working citizens."

All this and more to the same effect Dr. Stowell said in an address at the last meeting of the Proprietary Association of America. Add to it the corollary which the speaker evidently had in mind, that the open truths about the composition of proprietaries would lead to the suppression of the dangerous ones, and we have pretty clearly defined the objective point toward which the lay journal may properly work; not beyond that I believe. A number of correspondents have written me complaining that my view of the issue is too narrow; that the real, fundamental evil lies in the principle of self-medication. This may be true. Personally I do not care to drug myself. But as a journalist I cannot see that my profession is called upon to go into a question so dubious and delicate, even, in a sense, so academic and technical, as that of self-medication. In the broad field of human activity morals, not ethics, are the concern of the higher journalism. If we can help to uncover fraud where it exists, if we can warn against hidden agencies of destruction, there we may strive rightly and properly. But we are not fighting the doctor's battles in this patent-medicine campaign. Nor is there need that we should. Once my profession succeeds in driving the foe into the open the fight is over for us. We may turn our guns upon other strongholds and leave to you the determination of this issue.

There is plenty of work cut out for you gentlemen of the medical profession—those of you who are willing to take a hand in the fight. For the fight is coming, and soon. This spring there will be introduced in many state legislatures a patent-medicine bill looking to an effectual guardianship of the public health. The Proprietary Association of America will fight it with all the power of a daily press held in varying degrees of subservency. Its political agents, by well-practiced methods, will bring enormous pressure to bear. Yet I believe that if the physician will stand behind this bill; not alone as a physician, but as a citizen with a vote and a voice for the betterment of his Commonwealth, a number of other states will follow the lead of North Dakota and so restrict the nostrum business within the bounds of decency and fair dealing that fraud and poison will become unprofitable in those markets. In preparation for the

fight, let me urge you again to arm yourselves with such facts in the case as are obtainable. The American Medical Association, through its specially constituted board, is in a fair way to inform you as to the remedies which are advertised to you direct. But you will meet in your practice the open quack nostrums. Why not extend the campaign of enlightenment to them? To inquire into the content of every new proprietary that appears will be expensive, it is true, but it will be decreasingly expensive, because as the field of knowledge broadens the nostrum trade will contract. And is it not worth the endeavor of the combined medical forces of America, working through some adequately equipped committee, to discover and publish the true nature of every quack remedy as soon as its challenge is heralded in the advertising columns of the daily press?

The greatest present hope is in legislation. I should like to see every medical organization in the country appoint a committee on legislation, made up of its most representative members. Then, when the battle is joined in the legislatures, there would be no more of such apathy on the part of your profession as left the supporters of the recent patent-medicine bill in Massachusetts without the backing of so much as one medical delegation. To-day the Proprietary Association of America is rent with dissensions. Some of its leading spirits have deserted it. There was never before so brilliant an opportunity for the enemies of fraudulent nostrums. The attack will be launched from many quarters; the forces of quackery will be divided beyond hope of that concentration of influence and intimidation which have heretofore won its victories. This will be no guerilla warfare, but an organized and formidable plan of campaign. If the medical profession will mobilize its forces and for once speak its mind in the legislative halls, we shall see the effectual crippling of a traffic which takes its cynical profit from suffering and death.

GASTRIC AND DUODENAL ULCERS WITH REPORT OF CASES.*

By JAMES H. O'CONNOR, M. D., San Francisco.

IN RECENT years gastric and duodenal ulcers have attracted a good deal of attention owing to the brilliant achievements of Robson, Moynihan, Mayo and others in the surgery of the upper abdomen. As a result there exists in the surgical world of to-day, a strong tendency to regard many lesions of the duodenum and stomach as purely surgical affections, and I look forward to the time when all cases of duodenal and gastric ulcers which do not readily yield to dietetic measures or which show a tendency to relapse, will be surgically dealt with. Until this gets to be the rule I fear we will not make much progress in combating that very fatal affection, cancer of the stomach, for I believe that a great many cases of this disease have their starting point in an unhealed ulcer of the stomach. In gastro-enterostomy we have a remedy which relieves the symptoms of ulceration completely and permanently and permits of the sound healing of the ulcer. In the words of Moynihan "there is no operation in surgery which gives better results, more complete satisfaction to both the patient and the surgeon, than gastro-enterostomy for chronic ulcer of the stomach." By the time these cases reach the surgeon they are willing to submit to any operative procedure that offers them relief from the torments which they have suffered. They have for months, perhaps years, dreaded the meal hour, for while being compelled to satisfy the pangs of hunger they knew full well what pain and distress they would have to endure before the stomach emptied itself, either by the passing of the food into the intestine, or more frequently by vomiting. Therefore I think that operation is as fully indicated in those cases of chronic indigestion which do not yield to dietetic measures and in which ulceration fre-

*Read by title at the thirty-fifth annual meeting of the State Society, Riverside, April, 1905.